

**OFFICIAL**

P.6

**RECEIVED  
CENTRAL FAX CENTER**VIA FACSIMILE NO. (703) 872-9302**MAY 14 2004****PATENT  
HIT02 P-113****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Examiner : Shawntina T. Fuqua  
Applicant : Imad Mahawili, Ph.D  
Serial No. : 10/074,287  
Filing Date : February 12, 2002  
Group : 3742  
Confirmation No. : 4900  
For : ULTRA RAPID THERMAL PROCESSING  
CHAMBER AND METHOD OF USE

Commissioner for Patents  
P. O. Box 1450  
Alexandria VA 22313-1450

Dear Sir:

**RESPONSE**

In response to the Office Action mailed January 14, 2004, having a three-month period of response ending April 14, 2004, Applicant submits a Petition and Fee for a one-month Extension of Time and wishes to amend his application as follows:

PATENT  
MIC04 P-113

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Shawntina T. Fuqua  
 Applicant : Iman Mahawili, Ph.D  
 Group Art : 3742  
 Serial No. : 10/074,287  
 Filed : February 12, 2002  
 For : ULTRA RAPID THERMAL PROCESSING CHAMBER AND METHOD OF USE

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate
Total Claims	* 54	Minus	** 77	= 27	x \$9	\$ .00	x \$18
Independent Claims	* 7	Minus	*** 5	= 2	x \$43	\$ .00	x \$86
First Presentation of Multiple Dependent Claims				\$145	\$ .00	x \$290	\$ .00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT				\$ .00			\$172.00

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3

\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

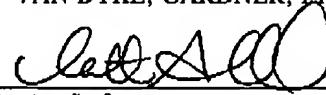
\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

1.  Please charge the amount of \$172.00 and any additional fees or credit overpayment to Deposit Account No. 22-0190. A duplicate copy of this sheet is attached.

By: VAN DYKE, GARDNER, LINN & BURKHART, LLP

Date: May 14, 2004

  
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CSC:lmsc